POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	DR	7841	9/10
O.I.P.E. CLASSIFIER			9 3 99
FORMALITY REVIEW			

INDEX OF CLAIMS

✓	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
−	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim		Date								
Final	Original	1-5-3-00	10-1-00	1-1-01	10-2-22	6-24-03				
	1		✓	✓	✓	✓				
	3		−	✓	✓	✓				
	4		✓	✓	✓	✓				
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If more than 150 claims or 10 actions
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